

09/762602

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	HC	45	2/25
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	AN		3-30-01

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
= ..... Allowed I ..... Interference  
- (Through numeral)..... Canceled A ..... Appeal  
+ ..... Restricted O ..... Objected

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APPLICANTS

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Form F  
(Rev. 6)

Claim	Final	Original	Date
1	✓	✓	5/23/01
2	✓	✓	3/22/02
3	✓	✓	1/6/03
4	✓	✓	7/2/03
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
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49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	7/2/02
52	✓	✓	
53	✓	✓	
54	✓	✓	
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Claim	Final	Original	Date
101	✓	✓	
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142	✓	✓	
143	✓	✓	
144	✓	✓	
145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions  
staple additional sheet here

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